

SENATE BILL No. 367

DIGEST OF INTRODUCED BILL

Citations Affected: IC 25-26-16.

Synopsis: Drug regimens. Defines "written authorization". Adds the ordering of tests as a modification by a pharmacist of a drug regimen. Allows a physician to delegate authority to a pharmacist to modify a patient's drug regimen under the physician's supervision. Requires a written authorization by a physician to include the following: (1) The physician who is delegating the authority to modify the drug regimen. (2) The patient's name. (3) The name of any pharmacist that is authorized to modify the patient's drug regimen. (4) The physician's diagnosis of the patient's condition or disease. (5) The method of documentation for any modification made of a patient's regimen by a pharmacist. (6) The frequency and type of communication necessary for each modification of a patient's drug regimen. Establishes certain conditions that must be met in order for a physician's written authorization to be valid when modifying a patient's drug regimen.

Effective: January 1, 2002.

Johnson

January 18, 2001, read first time and referred to Committee on Health and Provider Services.



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First Regular Session 112th General Assembly (2001)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2000 General Assembly.

SENATE BILL No. 367

A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

1 SECTION 1. IC 25-26-16-1.5 IS ADDED TO THE INDIANA
2 CODE AS A **NEW** SECTION TO READ AS FOLLOWS
3 [EFFECTIVE JANUARY 1, 2002]: **Sec. 1.5. (a) As used in this**
4 **chapter, "written authorization" means the authority given by a**
5 **physician to a pharmacist licensed under IC 25-26 by entering into**
6 **a written agreement authorizing the delegation of the adjustment**
7 **of a patient's drug regimen by a pharmacist.**

8 **(b) The term does not include authorization to a pharmacist**
9 **employed solely by a mail order only pharmacy.**

10 SECTION 2. IC 25-26-16-2 IS AMENDED TO READ AS
11 FOLLOWS [EFFECTIVE JANUARY 1, 2002]: Sec. 2. For purposes
12 of this chapter, a pharmacist adjusts a drug regimen if the pharmacist:

- 13 (1) changes the duration of treatment for a current drug therapy;
14 (2) adjusts a drug's strength, dosage form, frequency of
15 administration, or route of administration;
16 (3) discontinues the use of a drug; ~~or~~
17 (4) adds a drug to the treatment regimen; **or**



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1 (5) orders tests.

2 SECTION 3. IC 25-26-16-7.5 IS ADDED TO THE INDIANA
3 CODE AS A NEW SECTION TO READ AS FOLLOWS
4 [EFFECTIVE JANUARY 1, 2002]: Sec. 7.5. (a) A physician may
5 delegate to a pharmacist the authority to modify a drug therapy
6 regimen as part of drug therapy management. The physician
7 making the delegation shall adequately supervise the pharmacist
8 that modifies the drug regimen.

9 (b) A physician may delegate authority under this section under
10 the physician's diagnosis and written authorization.

11 (c) The written authorization must state the following:

12 (1) The physician who is delegating the authority to modify
13 the drug regimen.

14 (2) The patient's name.

15 (3) The name of any pharmacist who is authorized to modify
16 the patient's drug regimen.

17 (4) The physician's diagnosis of the patient's condition or
18 disease.

19 (5) The method of documentation for any modification made
20 of a patient's regimen by a pharmacist.

21 (6) The frequency and type of communication necessary for
22 each modification of a patient's drug regimen.

23 (d) In order for a physician's written authorization for
24 modification of a patient's drug regimen to be valid:

25 (1) the physician must authorize the use of the drug; and

26 (2) the changes in a drug regimen made by the pharmacist
27 must relate to the physician's diagnosis of the patient's
28 condition or disease.

29 SECTION 4. IC 25-26-16-8 IS AMENDED TO READ AS
30 FOLLOWS [EFFECTIVE JANUARY 1, 2002]: Sec. 8. (a) In a
31 hospital, documentation of protocols must be maintained in a current,
32 consistent, and readily retrievable manner.

33 (b) A pharmacist who adjusts a drug regimen is required to
34 document decisions made under this chapter in a manner that shows
35 adequate, consistent, and regular communication with an authorizing
36 practitioner. After making an adjustment or a change to the drug
37 regimen of a patient, the pharmacist shall immediately enter the change
38 in the patient's medical record or notify the prescribing physician in
39 a manner authorized by the physician under section 7.5(c)(6) of
40 this chapter.

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